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ABSTRACT

This unit for American Indian girls 15 to 18 years old and for their parents is an attempt to create a better understanding of alcoholism. The narrative section focuses upon the following ideas: (1) what alcoholism is: (2) frequency of alcoholism: (3) physical effects: (4) the effect of alcoholism on the family: (5) causes of alcoholism: (6) signs of alcoholism: (7) understanding the alcoholic parent: and (8) teenage drinking. The activities section consists primarily of six case studies which should be useful in promoting discussion and in increasing understanding of the problem. There is a quiz entitled "Questions About Alcoholism." The leaders' guide provides the answers to the quiz, and also a series of sketches which can be used in discussing alcoholism. (Author/CM)

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Alcoholism

Debbie Tucker Krueger

Choices and Careers
Free to Choose

RC 012467

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Japanese Proverb

"First the man takes A drink,
then the drink takes a drink,
and then the drink takes the man."

LUEX Cooperative Extension Program
University of Wisconsin-Extension

Alcoholism

Book III

by Debbie Tucker Kruger

Illustrated by Amy Martin

About The Author

Debbie Tucker Kruger grew up in the Forest County Potawatomi Community. She has a B.S. degree in social work from the University of Wisconsin—Superior. Amy Martin did the illustrations for the unit.

1978

About The Program

"Alcoholism" has been developed as part of the project, Careers & Choices, Free to Choose, a career development project for tribal girls. The project was developed with the assistance of tribal women in Wisconsin and was funded with special needs funds from Extension Service-USDA.

Fact Sheet

Alcoholism - Unit for Girls & Parents

Choices and Careers
Free To Choose

This unit for girls 15 to 18 years old and for parents is an attempt to create better understanding of alcoholism. The unit contains a number of case studies which should be useful in promoting discussion and in increasing understanding of the problem. A series of sketches are provided which can be used in discussing the subject:

The unit focuses upon the following ideas:

What is alcoholism?
Frequency of alcoholism.
Physical effects.
The effect of alcoholism on the family.
Causes of alcoholism.
Signs of alcoholism.
Understanding the alcoholic parent.
Teen-age drinking.

The unit contains the following materials:

Leader's Guide (W2B015)
Booklet, "Alcoholism" for girls 15 to 18 years old and their parents (W3B015)
Leaflet, "The Alcoholic Teen-Ager, How Parents Can Help" for parents (W4P15)

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UWEX Cooperative Extension Programs
University of Wisconsin-Extension

ALCOHOLISM

What is Alcoholism?

Alcoholism is a human problem involving the drinking of alcoholic beverages (for example, beer, wine, and whiskey). The National Council on Alcoholism says the alcoholic is "a person who is powerless to stop drinking and whose drinking seriously alters his normal living pattern." You are probably familiar with such phrases as "drunk," "smashed," "loaded to the gills," or "higher than a kite," used to describe a person who has been drinking. However, "drunkenness" is not the same as alcoholism. Drunkenness may be habitual, but it is not compulsive. In other words, a person may get drunk frequently, but she is able to control the amounts she drinks. But the alcoholic person is unable to control her use of alcohol. She drinks too much and too often.

Alcoholism is considered to be an illness or disease, since the alcoholic has no control over the amount she drinks.

Television often shows the alcoholic as a skid row bum, but alcoholism can be a problem for any individual. Alcoholism is the result of drinking increasing amounts of liquor over a long period of time; and almost anyone may become an alcoholic.

Frequency of Alcoholism

The number of alcoholics in America is thought to be between seven and ten million persons. This means that at least one in every 20 and probably one in every 12 people over the age of 18 is an alcoholic. Alcoholism is an even more serious problem for us, because the rate of alcoholism is higher among Indian people than it is for other populations.

Physical Effects

The life span of the average alcoholic is about 12 years shorter than that of the average nonalcoholic. A large amount of drinking can result in ulcers, internal bleeding, heart and liver damage, and the destruction of brain cells. The alcoholic may then show loss of memory, loss of judgment, and the loss of the ability to concentrate.

Besides the damage that a great amount of drinking has on the individual herself, drinking seriously affects others. In 1970, an estimated 35,000 Americans were killed in car accidents in which alcohol was involved. Alcohol now ranks as the third major cause of death in the United States.

The Effects of Alcoholism on the Family

Alcoholism also has serious effects on marriage and family life. Alcoholism is often one of the major causes of marriage difficulties. The alcoholism problem of one of the parents in a family not only causes problems between the parents but also creates serious problems between the parent and the children, especially since the problem of alcoholism is so difficult to understand.

Many different authorities have outlined the stages in becoming an alcoholic. The stages are different but still very similar. Joan K. Jackson has set up seven stages that she believes form the pattern of alcoholism, including the effects alcoholism can have on the family. Briefly going through her explanation of these stages may help us understand the problems and changes a family may experience when there is an alcoholic parent in the family.

In the <u>first stage</u>, the alcoholic denies that she is the victim of a disease—alcoholism. The alcoholic tries to convince herself that

her drinking is normal.

The second stage involves an attempt to eliminate the problem. There are arguments between the parents, and between the parents and the children because of the drinking problem of one of the parents. If the alcoholic is the father, the children are shielded from the father's behavior, and they try to hide it from his employer by lying. The more the wife complains or says something about the husband's drinking, the more he drinks; and husband and wife grow farther apart. The wife may blame herself, and she may feel inadequate as a wife, a mother, and a woman. She may feel that she can't meet her husband's needs. He may try to stop drinking but is unable to do so.

The third stage is disorganization. The husband's attempts to stop drinking lessen and may even stop. The father's drinking can no longer be hidden from the children. The father then loses his status or role in the family. The family goes to public agencies for help and support, and this step damages their self-respect. The wife may be confused and hurt and as a result become more anxious and hostile and behave senselessly.

Joan Jackson says that stage four usually involves some crisis that forces the family to change. In order for the family to continue, the wife takes over the husband's role as head of the family. The husband may be ignored and given the status of a delinquent child. The wife begins to have feelings of pity and protectiveness towards her husband, and as a result her feelings of hostility toward him decrease. She no longer feels that his alcoholism is her fault in any way. She becomes the head of the family and begins to start planning things for the family. Often, she may be helped by various agencies, will lose her sense of shame, and will begin to understand that her husband's

alcoholism is an illness.

During this time, the husband will be unemployed and may be imprisoned or hospitalized. He may finally see that he needs help with his problem. The family will try to help the father and get him in touch with agencies that can help. The family tries to return to the status in which the father is the head of the household. When the father again starts drinking, the family is greatly disappointed, hurt, and angry.

Thus in stage five the husband and wife will be separated, and they may decide to get a divorce. Both the wife and the children go through emotional difficulties because of the divorce action.

Stage six is defined as the stage of reorganization of the whole family as a unit if the husband stops drinking.

Even if the husband is cured and stops drinking and the marriage lasts, there are still many problems. The family again needs to make role changes, since the mother has been the head of the household for so long. The family may owe many bills, and the children may be unable to accept the father. It is hard for the family members to forget the past. As a result, the children may still distrust the father and not accept his decisions, and this will upset and anger the father.

The effects on a family in which the mother is the alcoholic can be just as serious and upsetting to the family, since the mother is usually responsible for the daily care of the children and the home.

Even after the alcoholic parent has gained control of his or her drinking, a great deal of time and work by all family members may be needed before the family is able to operate as it once did.

What Does Alcohol Do?

Alcohol is a depressant. It dulls the senses and as a result also dulls the brain, causes loud speech, and hinders physical control. While drinking, the alcoholic gains more and more self-confidence and loses any sense of embarrassment or guilt as the alcohol deadens the restraining influences of the brain. A large intake of alcohol will result in loss of memory, unconsciousness, and possible death.

Often a person who is drinking will experience a sense of warmth and well-being. In this kind of mood, unpleasant realities are screened out, and the drinker's feelings of self-esteem and power rise. The drinker's worries are temporarily left behind. So the drinker is stimulated emotionally while his or her intellectual and motor functions are impaired.

Causes of Alcoholism

Why do some people become alcoholics while others who drink are not? There are many theories on the causes of alcoholism. Some researchers have tried to define the "alcoholic personality" in an effort to discover whether any common factors exist among alcoholics that might point to a single cause of the problem.

Some psychiatrists hold that the illness is rooted in a form of psychological disturbance. Many sociologists see environment and the pressures of daily life as major factors. Others feel it could be the result of a change in metabolism or a glandular deficiency.

None of these theories is accepted as being a cause for alcoholism by itself. It appears, however, that in the case of the heavy drinker, the body adapts gradually to the presence of alcohol and eventually

becomes dependent on it. It also seems to be true that emotional instability can lead some people to seek an escape through drinking. And certainly, an unpleasant environment may cause some to drink.

Investigators have found that some people turn to alcohol in response to anxiety. Through alcohol the individual can find a means of relieving anxiety, resentment, depression, or other unpleasant feelings resulting from stressful aspects of his or her life.

In most cases of alcoholism many or all of these factors—and some not mentioned—seem to be working together. It is a complicated illness which can be seen as one part physical, one part psychological, one part sociological, and one part alcohol.

It could also be said that alcoholism is a result of one part cultural influence. Our culture has become dependent on alcohol for social occasions, and as a means of reducing tension. The effect of cultural attitudes toward drinking is well shown by the Moslems and the Mormons, whose religious values prohibit the use of alcohol, and by the Jews, who limit the use of alcohol to religious rituals. The rate of alcoholism among these groups is extremely low. The rate of alcoholism is proportionately higher among the French and Irish where alcohol is culturally more accepted. Thus cultural acceptance of alcohol as a means of reducing tension helps increase the use of alcohol and, therefore, alcoholism.

Another important reason some people become alcoholics and others don't is that some people abuse alcohol by developing unwise habits in its use. Such "bad" habits include drinking before meals, before social occasions, every time a crisis arises, before going to bed—anytime one starts drinking more and doesn't try to bring her pattern of drinking back to the original one.

Paula K., a young and attractive business executive, stated, "I blamed everybody and everything for my drinking. I kept pointing the accusing finger at my job, my family, the abrasive life in the city, and everything except myself. You have to remember that I was not an alcoholic in the sense that I couldn't function. It was just that I drank every day and drank too much until it became a regular part of my life. And then my life became irregular.

"You see, even when a person gets to the point where alcohol has become too important, she still doesn't want to quit because everyone else she knows drinks. She wishes maybe she could at least control it but finds out it just isn't possible."

How Can An Individual Tell If She Is An Alcoholic?

One of the strangest aspects of this illness is its ability to hide itself from the sufferer. "I worked hard with two excellent psychoanalysts," says one AA member, "both on the anxiety problems of my childhood and on current fears. But I never mentioned my drinking, nor did I once associate alcohol with my ever-growing terror."

If the illness is so hard to recognize, how can one tell whether or not she is an alcoholic? What is the yardstick? Drinking in the morning? Drinking alone? Not necessarily. The test is not <u>when</u> you drink or even <u>why</u> you drink. The important question is, "What has drinking done to you?" How does your drinking affect your family, your home, your job or schoolwork, your social life, your physical well-being, and your inner emotions?

Trouble in any one of these areas suggests the possibility of alcoholism. It need not be devastating trouble—at first. For a surprising length of time, many alcoholics can keep things running and

looking normal. If an individual can cover up the extent of her drinking, she must ask herself how much effort is involved and if the "fun" is really worth it.

Alcohol affects individuals differently. Some people can drink large amounts of alcohol and apparently suffer no ill effects—no hangovers or blackouts. Other individuals may experience these alcoholic symptoms from the very start of their drinking. No matter how alcohol affects a person, alcoholism is still a progressive illness. In other words, the drinking starts going more and more beyond control. The attempt to control one's drinking is as much a symptom of alcoholism as are the blackouts and the hangovers.

Many alcoholics at some time will decide that, if they move and get out of the area they are in, they can stop drinking. This mistaken idea has been termed a "geographic cure." As one AA member states, "I was getting sicker all the time, trying as best I could to conceal it from my coworkers. I thought I would be able to quit drinking if I moved out to the country, away from temptation. It wasn't long until I wondered why I had moved. I was 'trapped' in the country."

Some alcoholics will even attempt one final escape from their drinking and themselves—suicide. If they survive, this may be the time that they arrive at a turning point and reach out for help. But the "turning point" can come at any time—whenever the individual decides to face her problem and to do something about it. Only the alcoholic herself can make that decision, and hopefully with education and a greater understanding of alcoholism more alcoholics will be able to reach the necessary turning point sooner.

Understanding the Alcoholic Parent

You have read that alcoholism is a health problem, an illness. The idea that alcoholism is an illness is not a new one, and most people can accept the general statement as being true. But that idea is not so easy to accept when it involves someone you know—a neighbor or friend, a relative, or especially a parent, or a husband or wife, or yourself. Then the old attitudes return: "Why can't she drink like a lady?" or "Why can't I drink the way other women do?" or "Why can't or won't he stop? He has no willpower." The alcoholic may feel that he or she is no good and is a failure as a person because of inability to stop drinking. Those close to the alcoholic may also feel that they are somehow responsible and have failed the individual in some way, and they also feel guilty.

The only was to understand an alcoholic is to understand that alcoholism is an illness, an illness that has nothing to do with morals or manners or willpower. Alcoholism is an illness that afflicts all sorts of people just as cancer, or heart disease, or any other kind of illness. Just as an individual cannot control or stop the spread of cancer through her body by sheer desire or willpower, the alcoholic cannot control her drinking.

Therefore, an important thing we can do for alcoholics is to understand that they are victims of an illness, and not reject them or dislike them. It is also important to understand what kinds of problems, stress, and/or insecurities, if any, may have helped such persons turn to alcohol in the first place.

If we can understand and accept these ideas about alcoholism, we may be able to help alcoholics even more. The first step for the

alcoholics, whether alone or with help, is that they admit that they are alcoholics (that alcohol is interferring with their life). Secondly, the alcoholic must seek the help of other people and agencies—psychiatrists, social workers, and Alcoholics Anonymous (AA). (This seems to be the group that has been able best to help the alcoholic.) Even after an individual has admitted being an alcoholic and sought help, things will not be easy. He or she must live one day at a time, not taking a drink that day, for one drink leads to another. During these difficult times the alcoholic will need the love, help, support, and understanding of family and friends.

Remember that the alcoholic was a "normal" individual until his or her drinking reached disease proportions.

Teen-age Drinking

Alcoholism is important not only in the way it may affect adults in your lives, and thus your families, but also because it is becoming an increasing problem among teen-agers. According to the National Institute on Alcohol Abuse and Alcoholism, 1.3 million Americans between 12 and 17 have serious drinking problems. About one-third of high school students get drunk at least once a month. And arrests of teen-agers for drunken driving have tripled since 1960; <u>60 percent of the people killed in drunken-driving accidents now are in their teens</u>.

Why has there been such an increase? Drinking has become more accepted and is promoted more through mass media: television stars are photographed drunk, and advertisements promote alcoholic beverages as being necessary for having a good time.

Teen-age drinking often starts in groups; teenagers gather together and make arrangements to get liquor. Unfortunately in our

society a person often gets "razzed" if he does not drink. For example, in an article in the April, 1975, issue of Reader's Digest one teen-ager states, "Even when I was only 12 some of us were into drugs, some were into booze. You'd get put down if you didn't do something. I used to feel that I didn't belong, that I wasn't part of the crowd. But when I drank, I lost my fears, I could talk to people."

Joel Bennett, president of the New York Council on Alcoholism, stated, "Some people can become alcoholics overnight, from the first drink. We're seeing kids today who have already experienced all the symptoms of advanced alcoholism—the blackouts, the shakes, even tremors—things you usually find only after a long history of drinking."

I have mentioned how alcoholism can affect and destroy aspects of an adult's life. The teen-age alcoholic is no different. Usually, she doesn't stay in school, she ends up breaking with her family because they can't cope with her drinking problem, and their health begins to worsen.

A teenager, Eloise, says that teenagers can tell if they are developing, or already have, a drinking problem. "For example, if they have blackouts, then wake up and not know where they are—that's always a sign. And if you're always telling yourself that you don't have a problem, you probably do have one. Another sign is if you get into trouble when you drink, or if it interferes with your schoolwork."

Today's increased indulgence in liquor presents a serious problem for both teenagers and their parents. Early detection of a drinking problem is a good way to win the fight against alcoholism. The disease is less expensive to treat in its early stages, the chances for recovery are greater, and there is less likelihood of any permanent

damage to one's health. Equally important is the fact that early detection may help to preserve the family unit.

Everywhere the recovered alcoholic goes, there are temptations to drink. Therefore, it's a lot easier to learn to drink sensibly than it is to have to try to live without drinking. Alcohol, when used sensibly, can be a pleasant ingredient in the enjoyment of certain social situations. It is for these reasons that one should learn to drink wisely.

Essential to drinking safely is an awareness of the nature of alcohol and its effect on the human body and mind, and an acceptance of the fact that abusive drinking can lead to an incurable disease.

There is one thing everyone can do about the abuse of alcohol and alcoholism; she can prevent it from becoming a personal problem by being ruthlessly honest and aware of her own drinking.

Once again, it cannot be overemphasized that early detection and treatment can prevent much human suffering. And there is an endless number of individuals and organizations waiting to help.

Early Warning Signs of Approaching Alcoholism

1. Increased Consumption. One of the first signs that a drinker may be becoming an alcoholic is her increased consumption of alcohol. This increase may seem gradual, but a marked change will take place from month to month. Often the individual will begin to worry about her drinking at this point.

2. Extreme Behavior. When the individual, under the influence of alcohol, commits various acts that leave her feeling guilty and embarrassed the next day, her indulgence is getting out of hand.

3. "Pulling Blanks" or Blacking Out. When an individual cannot remember what happened during an alcoholic bout, even though she was awake and carrying on a conversation, her alcoholic indulgence is becoming excessive.

4. Morning Drinking. An important sign that a frequent drinker may be becoming an alcoholic appears when she begins to drink in the morning either as a means of reducing a hangover or as a "bracer" to help her start the day.

Adapted from Abnormal Psychology and Modern Life, by James C. Coleman, 1972.

Activity Section

QUESTIONS ABOUT ALCOHOLISM

False	True		
_____	_____	1.	An alcoholic can control the amount she drinks.
_____	_____	2.	An alcoholic hurts only herself by her drinking.
_____	_____	3.	Alcoholism is considered to be an illness.
_____	_____	4.	Only skid row bums are alcoholics.
_____	_____	5.	Drinking a large amount of alcohol destroys brain cells.
_____	_____	6.	Alcoholism does not affect the individual's normal living pattern.
_____	_____	7.	It is estimated that between one in every 20, and one in every 12 persons over the age of 18, is an alcoholic.
_____	_____	8.	The life span of the average alcoholic is about 12 years shorter than that of the average nonalcoholic.
_____	_____	9.	Alcoholism does not affect the alcoholic's memory, judgement, or ability to concentrate.
_____	_____	10.	Alcohol ranks as the third major cause of death in the United States.
_____	_____	11.	The alcoholic knows that her drinking is not normal and that she is an alcoholic.
_____	_____	12.	Alcohol is a stimulant. (In other words, it helps rouse a person to activity or quickened action.)
_____	_____	13.	A "geographic cure" (moving to another area) can often help an alcoholic to stop drinking.
_____	_____	14.	Sixty percent of the people killed in drunken-driving accidents were in their teens.
_____	_____	15.	It is possible to drink "safely."
_____	_____	16.	There is no known cure for alcoholism.
_____	_____	17.	Alcohol affects all individuals in the same ways.
_____	_____	18.	The first step toward recovery for the alcoholic is to admit that she is an alcoholic.
_____	_____	19.	Blackouts, hangovers, and tremors are all symptoms of alcoholism.
_____	_____	20.	The rate of alcoholism in any culture is affected by the cultural attitudes toward use of alcohol.

A PRISONER

"I didn't drink for any
reason except that I liked it."

Now that I enjoy a measure of sobriety, I am able to see how blind I was for 20 years. I started drinking at 13. I drank a large quantity of port wine on a bet. I became very sick and drunk, and promised myself not to drink wine again.

My mother had remarried, and my stepfather kept whiskey in the house. We didn't enjoy mutual admiration. He didn't care for me, and I cared less about him. So I dreamed up a way to annoy him without getting into trouble. I drank his whiskey.

This had a twofold result: It was a form of revenge (I was too big for him to whip), and I acquired a great love for liquor. Naturally, my mother didn't believe him when he complained, because he usually overdid it himself.

I was in high school and going around with an older crowd. They drank, and I was in my element. There was nothing I liked better than to go out to drink. Let me say now that I didn't drink for any reason except that I liked it, and once I started I wasn't ready to stop with everyone else. Liquor was always important to me. I realize now that it was the measure I used in making friends. If you liked to drink, I was glad for your company. If you didn't care for it, you didn't see much of me.

In the meantime, I had developed a chronic illness that was aggravated by drinking, so quite often I went on the wagon. I stopped drinking when I wanted to—or, I should say, when I had to or else get very sick.

At 19 I decided to get married. All my friends were married or engaged. I had met my husband-to-be a couple of years before. He was a nice fellow that I dated steadily and had grown to like very much. Then by accident I found out that he drank and liked it and could hold it. My admiration knew no bounds, and so we were married. I had a lifetime drinking partner. Our marriage started out as one long celebration.

About a year after our daughter was born, I became very ill. The family doctor suggested that I stop drinking. He said I was potentially an alcoholic. I laughed, and I ignored him and my family and friends who complained about my drinking.

I did lose control more often now. Sometimes what started out as a few drinks for the evening went on for a week. To get off the hook, we moved to a new neighborhood and I went to work. I started finding excuses to drink more often. One day on my way to work, I needed a pickup and stopped for a drink. I remember having two more. The next clear memory came three days later, and I knew fear for the first time. I told my family that I must be mentally ill for this to happen.

I started going to a psychiatrist. Again, I was off the hook. Drinking wasn't my problem, so naturally I never mentioned it except to say I drank only on occasion. I didn't tell him I usually made sure I had an occasion to drink, and the occasions included him.

After a couple of months, I decided he wasn't helping me and was only taking my money. I could drink and talk to my favorite bartender with the money the psychiatrist cost me.

So the years passed, and I reached the stage where I couldn't cope with anything except a drink. My husband and I separated several times. Each time, we would go back together and once again move to a

new neighborhood to start over. I would have high hopes that things would change.

They did. They got worse. I finally blew my top and ended up in Bellevue Hospital. My mother interceded and got me out under private psychiatric care. This doctor told me I was a schizophrenic. My mother told me I wasn't an alcoholic. I was very happy. I was crazy, a nut. I wasn't an alcoholic.

When I finally stopped hearing voices and was well again, I had to celebrate—this time with the doctor's permission. He suggested that I drink nothing but good Scotch whiskey and no more than three drinks. He didn't say what size glass. I proceeded to acquire a taste for Scotch and was very successful--so successful that I was soon a regular customer at the pawnshop.

When I ran out of articles to pawn, I began drinking wine again. My husband and I separated for the last time. He gave me a choice: him or the bottle. I didn't have any choice. By now I could live without a drink, or so I thought.

The next two years, I lived in a nightmare. Guilt, fear, and remorse were my daily companions. I no longer had any friends; they crossed the street when they saw me. Most of the time I was a drinking zombie. Finally, one day I woke up one more time in a strange room, and I knew I had to get help.

But I hadn't reached my bottom yet. Little did I know that for the next year and a half I would sink further into despair, because now I drank and didn't want to; that I would go to prison for a crime committed in an alcoholic fog, and finally learn how to live through a program called AA.

When I started attending AA meetings in prison, my prayer for

help was answered. One of the women used an expression which fits exactly what happened to me in this Fellowship. "I started living when I stopped crying and started trying." I tried to work the pattern given me by AA in the Twelve Steps—a model for today and all my todays.

A Hospital Inmate

I was gainfully and successfully employed from the time I was 19. I had some good jobs; I was a county superintendant of schools! I had a Christian home and fine parents, and I was not exposed much to alcohol until I was pushing 30.

The exact incidents of cause and effect would make a long-drawn-out not-so-interesting narrative. Looking back, however, I can see that my alcoholism was caused by emotional immaturity. I hadn't grown up. I had self-pity. I had resentments. I couldn't accept the death of my mother.

I had started as a social drinker, of course—or so I thought, as 'most everybody does. But I was a social drinker for a very short time. That booze was wonderful stuff for me! Full of booze, I thought I was the kind of person I wanted to be. I thought I was charming. I thought I had a lot of friends. I guess I even thought I was halfway beautiful!

I progressed rapidly into chronic alcoholism. It began to affect all aspects of my life: my job, my friends, and my health. But I was quite oblivious to all this while it was going on. For the first time, I lost a job, and I was to lose others later on. The last five years I drank I wasn't able to work at all. I was sick, hospitalized many times. Each time, I had to go through withdrawal from alcohol, and this became increasingly painful. Withdrawal is the torture of the damned, and it seemed easier to stay drunk than to go through it again. Any periods of sobriety I had were short-lived. Finally, I was afflicted with not only chronic alcoholism but chronic alcholic convulsions.

Eight years ago, I made a trip to the hospital on a stretcher. I have no recollection of that, nor do I remember anything about my five days in the hospital. They gave me a brain-wave test, a liver test, etc., and my doctor said he wouldn't release me unless I would agree to go to the state hospital for treatment of alcoholism. I agreed but had no intention of going. My only purpose in life was to get out of that hospital. It now seems incredible, but at the time I really wasn't seriously impressed with the diagnosis of liver damage—a good start on cirrhosis—nor with the possibility that just one more convulsion could do permanent brain damage.

I wasn't ignorant or stupid. I had gone to AA a few times. I had read the literature. I had heard some pitches. I thought it was all very fine—for other people. As for me, I could sober up by myself if I tried. I almost died trying.

Needless to say, after that last bad siege in the hospital, it was only a couple of weeks before I was again drinking and on the skids. Undernourished and anemic, with liver damage, I wouldn't have lived much longer except that the doctor who had attended me did not forget me and continued to inquire about my welfare. The few friends and relatives who still saw me once in awhile sheltered me and covered up my deplorable condition. But one day my brother told the doctor that I was in rough shape. And so I was committed for treatment because I refused to go voluntarily.

I thought commitment was an end to everything, even to life itself. When the deputy sheriff took me into the state hospital, I was so sick he had to help me walk, and I felt like a cornered animal. It was at this point, I now think, that I made a total surrender in my lone battle with alcohol. The stuff had beaten me! I no longer even

wanted to fight it. I had fought a long time and I had lost. I was defeated. The unexpected blessing of this surrender was that only on total defeat would I find victory.

The state hospital turned out to be a pretty good place. Gradually, I began to feel better, to eat, to sleep, to be able to walk without my knees buckling. The alcoholism-treatment program there was AA oriented. I began to listen. I wanted to learn.

At this writing, I have gone seven and a half years without a drink. I have a good job.

A Career Woman and A Mother

"I assumed my drinking was
one more symbol of neurosis."

Listening to AA stories, I have noticed that they fall into two categories: the people who had trouble with their drinking from their first drink, and the people who drank for years without trouble. I belong to the second group. I drank for more than 20 years without being aware of any compulsion to do so. I could leave alcohol alone, and frequently did.

But I had other problems—quite deep emotional ones. I suffered from depressions from adolescence on—perhaps even before. In my early twenties, after my child was born, I had severe postpartum depression and began a process of psychotherapy, which was to continue, with interruptions, for many years. I would experience relief—good times when I functioned well and was productive—but it always seemed to me that there was some invisible barrier between me and the life I wanted.

During this time, I had two marriages that failed. Alcohol played no part in either failure.

Ten years later, I knew I was in trouble with the bottle. I'd just had a professional success, but in the midst of it I came down with a case of mumps. When I got well, I found myself plunged into a severe depression that had no obvious causes, except that my doctor told me that virus diseases often left patients depressed. I don't think I told him then that besides depression, which was familiar, I was experiencing another thing that was strange. My drinking had

entirely changed its character. It had become compulsive.

My son was in his teens, and if the solitary drinker hates herself, the drinker who is a parent and responsible for the welfare of a child feels unspeakable guilt and self-loathing. And, of course, the way to get rid of guilt was to drink systematically until I passed out and woke up again, drank and passed out again. It was a time of nightmare. I had days of wondering whether I had not already died and was in hell. There were days when I could not open the blinds, nights when I dared not turn out the lights.

But somehow, I have no idea how, I was getting meals on the table, sending out laundry, seeing my son off to school. He and I loved and hated each other simultaneously. It was hard to tell which was the more painful. He was the one to whom I first admitted that I was alcoholic. He said to me, "Why do you drink so much, Mom? It makes you smell."

My answer was, "I drink because I'm an alcoholic."

But I didn't know what being alcoholic meant. Accustomed to thinking of myself as a neurotic person, I assumed that my drinking was one more symptom of neurosis and that what I must do about it was to delve yet deeper into my unconscious to find out what was making me drink, and then I would be able to go back to drinking as I used to do. So I again began the trek from one psychiatrist to another, never conspicuously drunk, never entirely sober. Of course, these doctors could not get through to me.

The last crazy twist of my drinking came after my son went off to college. One weekend, when I went to visit him, I took all the money I had left and bought a motel outside the town where his college was. It was a "geographic cure;" I hoped, by changing my residence and my

way of life, to leave myself behind.

In the first year, when I was involved in fixing up the farmhouse and the seven cabins that went with it, I actually managed to stop drinking. However, something else was now happening to me. When I went back to New York for a visit, I went to my doctor, who was pleased to see I'd lost 30 pounds. "What have you been doing?" he asked.

I said, "I think I've changed addictions."

"What do you mean?"

"I've shifted from addiction to alcohol to addiction to tranquilizers."

"Nonsense," he said. "You can't become addicted to tranquilizers."

That was something I was delighted to hear, so I took a new prescription and went on my way. Tranquilizers were relatively new at the time; now doctors know what I had already found out then. Each time I let my prescription run out, I was getting the classic withdrawal symptoms that medically define addiction. As an alcoholic, I was incapable of limiting the amount of medication I took to the amount prescribed by the doctor.

From here, my road downhill was steep. There was one hospitalization in a coma brought on by a combination of alcohol and tranquilizers; another, in a futile attempt to break my addiction to tranquilizers; and, at last, a third from an overdose of barbituates. Suicide was never far from my mind, but I don't think this was a true suicide attempt. I just wanted to be dead for a little while.

This time, I was in the care of a psychiatric clinic for a six-month stay. I had always thought of myself as a loner. Now I wonder if this word doesn't mask a need for people which is greater than average. In the hospital I began to feel a connection with other human

beings that would later make it much easier for me to dare to try AA. The patients there had a spirit of forgiveness toward one another, very like the warmth we feel toward our fellows in AA. Everybody in the hospital had, in one way or another, admitted that his life was unmanageable. We were brought together by a kind of foced humility, which sometimes fell apart into the healing grace of laughter. I have learned to think that when tragic things begin to seem comic, health has begun.

But when I left the hospital, I still had no idea that I was alcoholic. I was told not to drink but not why I shouldn't, so I only resented it and, of course, drank.

Then began a three-month vicious cycle of first drinking until I was terrified of alcohol, then taking tranquilizers until I was equally terrified of them. This "bottom" of despair, I feel, wasn't so important to my getting well as the first gleams of hope I began to see, in the form of the affectionate support of an aunt and uncle, and then a job (wangled for me out of sheer kindness) which I knew I could not do drinking.

I called a friend from the hospital who had been in AA for nine sober months and said I was ready to try. Within a week, I was at my first meeting, with the tremendously moving and releasing sense that I had come home, that I was where I belonged. I looked around the room and felt the difference in these people. Though I had known many sick people in the past, they were almost always trying to adjust to their sickness. These AA's were sick people trying to get well. I wanted that, too.

I continued to take tranquilizers for a week after my first AA meeting, but during that week I grasped the idea that, as an alcoholic, I had better not take anything that would change my mood chemically,

and I threw my pills away.

At first, I fully expected that, having been a drunk depressive, I could not expect to be a sober one. The greatest miracle of my sobriety for me has been my almost complete freedom from depression.

But as I tried to work the program, it began to show results in my life in terms of peace of mind, relationships with people, a slow resumption of professional proficiency. I am particularly grateful for my relationship with my son, who seems to have gained a new faith in life and himself by seeing me get well. "If you can do it, Mom," he said once, "anyone can!" A little left-handed, but nice.

A HOUSEWIFE

My mother died when I was 12 years old, and I used to think that my life would have been different if she had lived. However, I know more about the illness of alcoholism now, and I do believe that my problem was already a part of me even at that time. I was full of feelings of inferiority and extremely shy. My father did his best in raising me and my two younger sisters, but naturally he didn't know too much about girls. Still, he kept the family together until I went to college. At that time, he sent both my sisters away to boarding school, as well.

I can remember the overwhelming fear that gripped me as my father got ready to leave me at the college. I wept and begged him not to make me stay, to let me come home. I just knew I was not going to be able to cope with getting to know all those people. And I didn't. I was a misfit from the beginning and felt like one. So my years at college were not the gay time so many people recall but years of hurt feelings, rejection, and anxiety. Somehow, I muddled through.

Although I had never been popular with many dates (I was never a pretty girl), I did finally get married. My husband was a very handsome man, and I used to be smugly amused when people would say to me, "How did you ever get such an attractive man?" Now that I was married, I thought I would lose my fears and no longer be so anxious with people. Unfortunately, this was not the case. Every time I had to meet business acquaintances or other friends of my husband, I would find myself tongue-tied unless I had a drink. I had learned at college that a drink or two made it possible for me to communicate. And three drinks made me forget that I wasn't pretty!

Eventually, we had children, and they meant everything in the world to me. Yet I would awake horror-stricken to realize that I had been driving the car around the countryside in a blackout, the children with me.

Then my husband became very ill. Lonely and frightened, I felt the need to drink, even though the children—and now my husband, too—were dependent upon me. Much later, when I came to AA, I was easily able to accept the thought of God's grace, for I could look back at those many times when my children were playing unattended while I slept off the morning's drinking.

We moved to a small town in Massachusetts, and I hoped that a brand-new social circle would solve the problem. Strangely enough, it did for a while, because no one in our immediate circle drank at all, and so I went on the wagon. But during that time I was very resentful toward my in-laws, with whom we were living. Eventually, my resentments and my frustrations at the fact that we had to live with these people brought me back to the rationalization that perhaps things would be easier if "we" had a drink before dinner. It seemed to assert "our" independence of them, in some way.

I can guarantee that one way not to endear yourself to your mother-in-law is to get drunk publicly in a small community. I often did.

Our next move was to a small town on the New York-Connecticut border. We had an old farmhouse, hard to heat and hard to take care of. My husband was away frequently, so I was often alone there with the children. From then on, my drinking really accelerated, for I felt lonely and lost.

I've learned in AA that we cannot get sober for anyone else but

only for ourselves. However, I do believe that there has to be some motivating factor that makes us want to get sober, and I am sure that for me the motivating factor was my children. I will never forget my little girl's fourth birthday party. I promised her a lovely, lovely party. And I really thought it would be. I spent so long planning for it; I prepared all the decorations and cooked all the cookies and baked a cake. When the day came, the mothers brought their children, took one look at me, and stayed for the party. I was so drunk that they could not leave their children with me.

This breaking of promises to my children finally brought me to the realization that I could no longer live with myself, and so I turned to AA for help.

In time, through AA's Twelve Steps, I realized that if I would accept the love that was being offered to me so freely and try to share it with others, I could learn through AA to be comfortable with people. To me this was a wonderful step forward. And it led to one of the greatest gifts that AA has given me—no longer to be afraid. My life had always been dominated by fear: fear of people, of situations, of my own inadequacies. In AA I learned to have faith and so to live without fear.

A MINISTER'S WIFE

I am a second generation alcoholic, and AA was a household word almost as far back as I can remember. That proximity eventually saved my life. My father's 25 years in the Fellowship are his own story to tell; but because of him I was on speaking terms with the program and attended open meetings. All this made it a lot easier to grasp the AA program when, after many years had passed, I became a candidate for this "club" that has such painful entrance requirements.

Although I honestly liked the taste, the first warm glow, and the atmosphere of good feeling and fun that usually surrounds social drinking, the 13 years of my own drinking were all alcoholic: as much as I could and as fast as I could, always trying to prove that I could hold more and show it less and in this manner be an all-around success socially. The first gin and ginger ale at a fraternity party in college convinced me that alcohol was the open sesame to the glamorous, sophisticated world of my daydreams.

In high school, I worked hard to achieve that good-sport, everyone's friend, outstanding-citizen reputation that seemed so desirable. Most of the approval I demanded and needed desperately was given to me, but success, once achieved, always seemed a little empty. In college, I continued this on a larger scale, and the sense of dissatisfaction and the emptiness remained. I was bewildered.

After I finished college, my question unresolved, I plunged into marriage and found myself heading for a life of adventure as the wife of a missionary. Perhaps I thought "instant religion," through my marriage vows, would settle my inquietude. But I didn't "live happily ever after." The realities of marriage, the arrival of children, and

my life in a new culture were all dealt with in a most unsatisfactory way. Afraid that I couldn't fill the role I had created for myself, I let drinks bolster me and spur me on. I completely denied God and His way for me by the way I was living, though on the record I was one of his most loyal and faithful servants. That old ego of mine gloried in the "martyrdom" of a minister's long-suffering wife.

As the years went by, the demands and responsibilities of my husband's job increased. He traveled more than half the time and when at home was busy about church affairs. I felt deserted, neglected, and resentful at the routine of housework, amid stacks of diapers and runny noses. By this time, we were back in the United States, and I began drinking even more heavily to blot out anything I couldn't accept or deal with. I rationalized my behavior by seeing myself as the answer to people who found the church a little too stuffy.

Thanks to my healthy body and appetite, the physical effects were not immediately drastic, except that I put on a tremendous amount of weight. I seemed to acquire the placid, vegetable-like personality that went along with fat, but underneath I was miserable and disgusted with myself.

Taxing our already overburdened food budget to its limit, I spread out my visits to the liquor stores so I wouln't be seen too frequently at any one of them. I fabricated nonexistent guests who would be served from each bottle, and then hurried home to drink it all alone. Kidding myself, I thought I was successfully hiding the empties in garbage, in soap boxes, in the back of my closet. They eventually found their way into a neighbor's garbage pail, late at night, so no one would know that the minister's wife was a lush.

When my husband was elected to a high office in the church, we

had to return overseas. The height of achievement in our denomination had been reached, and we had healthy and beautiful children, many friends. But the emptiness and dissatisfaction were still there. I needed more and more alcohol to remove the pain and now also to give me the energy and desire to cope with the job required, as I saw it. But for me, the future consisted of the next bottle.

About this time, when things looked darkest, miracles began to happen. I began to be vaguely aware again of the AA program. My conscience hurt me as I spotted in myself the danger signs of alcoholism. I read articles about alcoholism; I took the "Are you an alcoholic?" tests and qualified with flying colors.

Then, one Sunday afternoon, a friend I'd known through the years dropped by as I was entertaining visitors and drinking compulsively. My glasses of gin were placed carefully around the house where I could quickly sneak gulps without being obvious, and with mouthwash handy to cover up the smell. The other guests left, and at the end of my friend's casual social visit, I was saying goodbye to him at the door when something made it possible for me to ask for help. I had always been the one to console others, and I was extremely proud of my independence and self-sufficiency.

My friend (now my sponsor in AA) answered that cry and did some wonderful Twelve-Step work on me during the next week, missing an airplane and canceling other important engagements to get me started on the long, rocky road to recovery. I got straight, no-nonsense AA talk from him. But also a handy shoulder to cry out my resentments and frustrations on, and a strong arm at my elbow to steer me into the meeting room for the first time.

I had spent 10 years destroying a personality, and now I had

finally come to my senses and with God's help had to start all over again. My pride, my selfish ego made this very difficult. I didn't like being dependent on others or even on the Other.

I've found the willpower to lose 30 pounds, and this physical improvement has given my morale a tremendous boost. My husband and I have had many friends among the AA members and their wives, and now we feel much more a part of the country in which we live. The children are far happier, less tense.

My wonderful husband was terribly hurt during my drinking, and it may be a long time before our marriage is what it should be. Although he is a clergyman and has been very successful in counseling others, his own wife wouldn't listen to him. Fortunately, he has been wise and has supported me by not pushing or preaching.

Sometimes I still get discouraged and dissatisfied. But as I look back over my short time in AA, I know I have grown. I'll be 35 in a few weeks, and the future looks good. I have a way to face whatever lies ahead, and with God's help I won't be drinking, at least today.

MARY

Mary is an intelligent, attractive, elementary-school teacher who is married to a writer some 10 years her senior. At age 29, she had been teaching for 7 years, and as a result of her high degree of competence had been given increasingly difficult classes. Mary stated that after a difficult day at school she had many unresolved problems that she needed to discuss with someone but seldom could do so with her husband, who was under sustained pressure himself and away on assignments a good deal of the time.

Thus, with her husband either away or too busy to talk, Mary turned to alcohol:

"I started having two or three cocktails every evening to settle my nerves. And as the pressure seemed to build up about three years ago, I found myself drinking heavily every night to blot out the events of the day. I seemed to have the insatiable craving for alcohol, and I could hardly wait to get home after school to get a drink. And on weekends, I was drunk from Friday evening through Sunday. On Monday mornings, my hangovers were something awful, and I started calling in sick. I knew my drinking was interfering with my work, but I couldn't seem to cope with either. Frankly, I became just plain desperate."

The principal of Mary's school became aware of the problem and suggested that she take a sick leave to obtain medical assistance. Examination revealed serious liver damage, and the physician informed Mary that if she continued to drink she would kill herself. He prescribed Antabuse to help her stop drinking. Although she had the prescription filled, Mary did not take the drug right away: "I was so terrified by what the doctor told me that I just had to have a drink

to calm me down. Then I was going to try the Antabuse. I really was." That drink led to three days of intoxication; finally, going into convulsions, Mary was hospitalized.

When she improved sufficiently to leave the hospital, Mary volunteered to join the local chapter of Alcoholics Anonymous and to continue seeing a doctor. Her crucial battle with alcoholism was just beginning.

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Alcoholism Unit for Girls

Leaders Guide

Debbie Tucker Kruger

Free To Choose Choices & Careers

WEX Cooperative Extension Programs
University of Wisconsin-Extension

W2B015

Alcoholism - Unit for Girls

1. Have the group complete the activity "Questions about Alcoholism" on page 15 of Book III. Following are the correct answers:

    1. False; the alcoholic is powerless to control the amount she drinks.
    2. False; it disrupts lives, marriages, and work performance. The alcoholic may have a car accident that could injure or kill others.
    3. True
    4. False; alcoholics are found in any class level, income level, occupational group, or race.
    5. True
    6. False
    7. True
    8. True
    9. False
    10. True
    11. False
    12. False; it is a depressant.
    13. False
    14. True
    15. True
    16. True
    17. False
    18. True
    19. True
    20. True

2. Have the group read the case studies of women alcoholics. The group can be divided and assigned to read two or three of the case

studies. After that it may be helpful to have some class discussion to reinforce the ideas presented in the paper. For example:

a. Why did each of these women begin drinking or begin to have a serious drinking problem? (Possibilities are revenge, peer group influence, emotional problems, stress, insecurity, etc. Alcohol gave them confidence.)

b. Why do you think that most of them would rather think of themselves as being mentally ill in some way than believe that they were alcoholics?

c. Did these women seem to have any similar personality characteristics, such as immaturity, a lack of self-confidence, or lack of feelings of security?

d. Did a "geographic cure" work for any of them?

e. How do they feel about the general attitude among teenagers that they must drink to fit in with the rest of the crowd and that they are hassled or ridiculed if they don't? Shouldn't these people be admired for their courage to stand up against this?

3. Use the sketches to do an illustrated talk or to promote discussion for each of the situations in the booklet on alcoholism. On the following pages is a brief description of each sketch and the sections of the booklet with which the sketches can be used.

4. If possible, have one or two alcoholics in the community come in to talk to the girls about their experiences and problems with alcohol. Have a question-and-answer period in which the girls may ask these individuals about alcoholism.

Sketch	Main Points to Be Covered From Booklet, "Alcoholism"
1. Sketch of business executive, housewife, and teenage girl	Alcoholism can happen to anyone. Discuss main ideas about "What is alcoholism?"
2. Sketch of car crash	Discuss main ideas about "Physical effects."
3. Sketch of family quarreling	Discuss main ideas about "The effect of alcoholism on the family" and the first two steps.

Sketch		Main Points to Be Covered From Booklet, "Alcoholism"
4.	Sketch of confused looking woman	Discuss the third step.
5.	Sketch of sad looking man	Discuss the fourth step.
6.	Sketch of woman and child	Discuss the fifth and sixth steps.
7.	Sketch of woman and two children	Discuss main ideas about "What does alcohol do?"
8.	Sketch of group of teenagers drinking	Discuss the main ideas about "Causes of alcoholism."
9.	Sketch of sad looking young woman	Discuss the main ideas about "How can an individual tell if she is an alcoholic?"
10.	Sketch of teenage girls	Discuss main ideas about "Understanding the alcoholic parent."
11.	Sketch of two teenage girls drinking	Discuss main ideas about "Teenage drinking."

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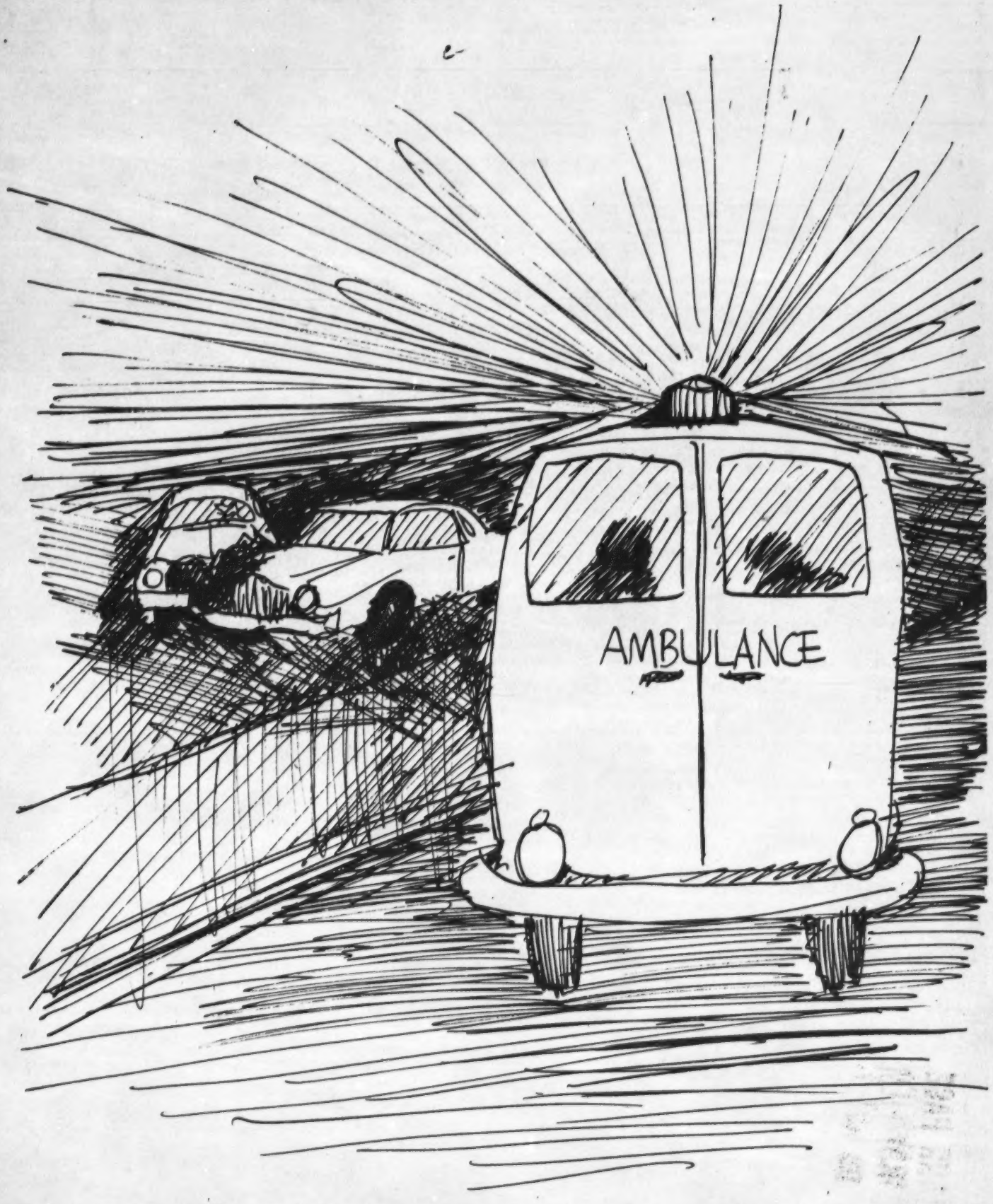

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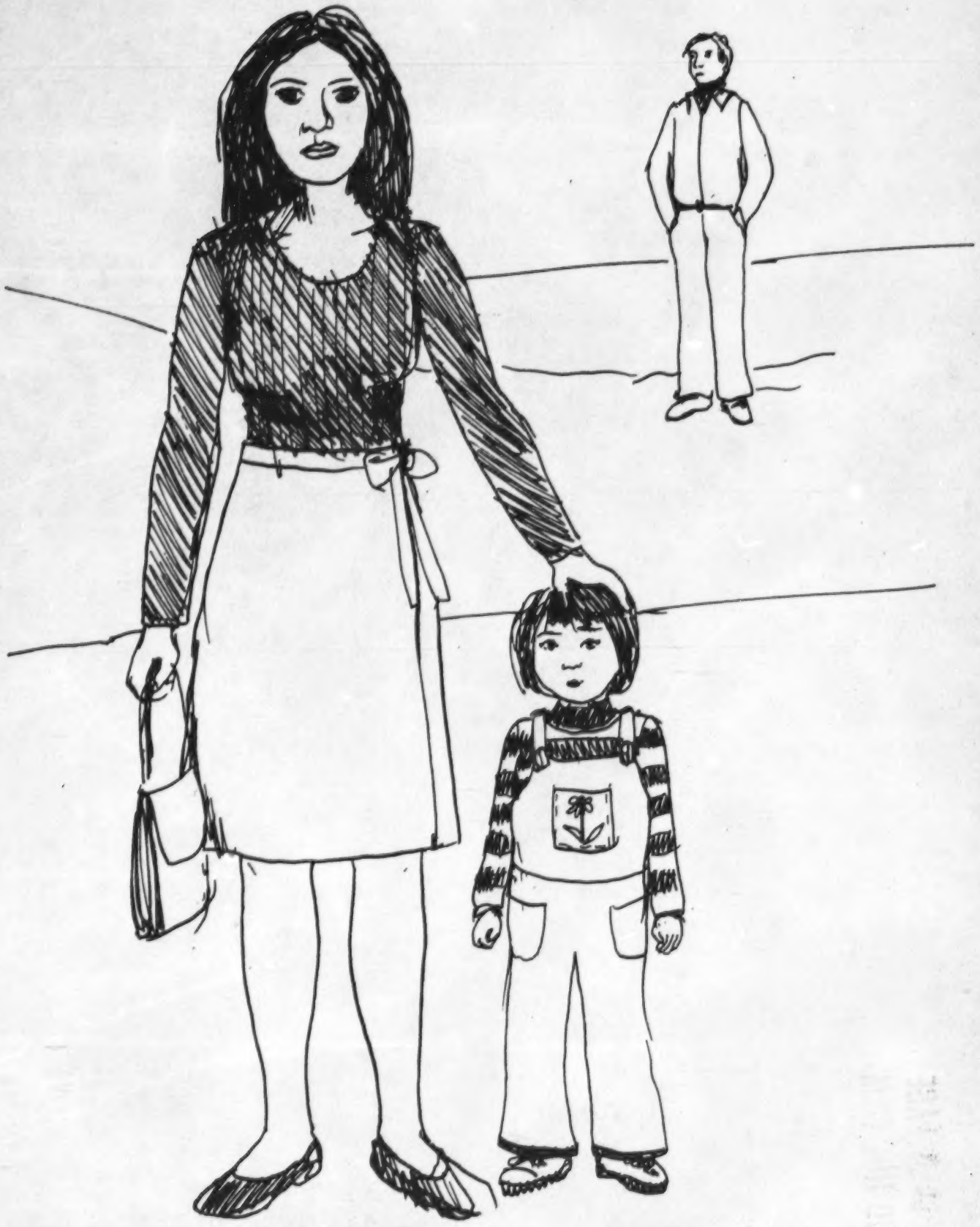

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